



Division of Licensing and Protection  
103 South Main Street  
Waterbury, VT 05671-2306  
<http://www.dail.vermont.gov>  
Voice/TTY (802) 871-3317  
To Report Adult Abuse: (800) 564-1612  
Fax (802) 871-3318

April 16, 2015

Ms. Ann Bouza, Administrator  
Equinox Terrace  
324 Equinox Terrace Road  
Manchester Center, VT 05255-9253

Dear Ms. Bouza:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **February 24, 2015**. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

A handwritten signature in black ink, appearing to read "Pamela M. Cota".

Pamela M. Cota, RN  
Licensing Chief

APR 14 2015

PRINTED: 03/09/2015  
FORM APPROVED

## Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  0127	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  C 02/24/2015
NAME OF PROVIDER OR SUPPLIER  EQUINOX TERRACE		STREET ADDRESS, CITY, STATE, ZIP CODE 324 EQUINOX TERRACE ROAD MANCHESTER CENTER, VT 05255		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R100	Initial Comments:  An unannounced on-site complaint investigation was conducted by the Division of Licensing and Protection on 2/24/15. There was a regulatory finding surrounding this investigation.	R100		
R116 SS=D	V. RESIDENT CARE AND HOME SERVICES  5.3 Discharge and Transfer Requirements  5.3.b Emergency Discharge or Transfer of Residents  (1) An emergency discharge or transfer may be made with less than thirty (30) days notice under the following circumstances:  i. The resident's attending physician documents in the resident's record that the discharge or transfer is an emergency measure necessary for the health and safety of the resident or other residents; or  ii. A natural disaster or emergency necessitates the evacuation of residents from the home; or  iii. The resident presents an immediate threat to the health or safety of self or others. In that case, the licensee shall request permission from the licensing agency to discharge or transfer the resident immediately. Permission from the licensing agency is not necessary when the immediate threat requires intervention of the police, mental health crisis personnel, or emergency medical services personnel who render the professional judgement that discharge or transfer must occur immediately. In such cases, the licensing agency shall be notified on the next business day; or	R116	The facility will notify the resident and/or their legal representative of a discharge or transfer in writing at least 72 hours before a transfer or 30 days before a discharge from the facility.  In the event of an emergency discharge or transfer the MD will be notified and the facility will keep a record of this in the resident's chart.	4/13/15

Division of Licensing and Protection  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

RN

4/13/15

STATE FORM

6899

H5YC11

If continuation sheet 1 of 2

R116 POC accepted 4/14/15 Pmcstapw

Division of Licensing and Protection

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R116	<p>Continued From page 1</p> <p>iv. When ordered or permitted by a court. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review the facility failed to notify the State Agency to do an emergency discharge of a resident, Resident #1. Findings include:</p> <p>During review of Resident #1 medical record, it was discovered that on 12/2/14, s/he was transported to the hospital and did not return. Per interview with the Executive Director on 2/24/15 at 2:44 PM, the resident had uncontrolled behaviors that presented as a danger to staff. Resident # 1 had calmed down when the rescue squad attendants arrived on scene. In the hospital s/he tested positive for a UTI, but was requiring a 1:1 sitter in the Emergency Room. Per statement for the Executive Director, during this interview, s/he stated that s/he told the hospital, when they inquired about the return of Resident #1, that at this time because of the behaviors and requiring a 1:1 sitter, the resident could not return as the facility could not manage him/her. The resident was discharged from the facility when she was unable to return. Per the Executive Director there were no discharge plans prior to this incident. At 3:06 PM, the Executive Director confirmed that the State Agency had not been notified of an emergency discharge.</p>	R116	<p>Should the Resident present a danger to himself or others, the facility will request permission from the licensing agency to transfer or discharge immediately or in the event of immediate intervention the facility will notify the licensing agency on the next business day.</p> <p>The facility will follow the licensing regulations for all transfers and discharges 4/13/15</p>